Campaign Finance Tracking Form for Local Election Officials

Call OCPF with campaign finance questions at 617-979-8300

Candidate or Comn	nittee David Murphy Year 2021
Report:	Pre-Preliminary Pre-Plection30-DayYear-End
0	Organization / Providing Materials / Notification *
	nizational form provided to candidate or committee (M101, M101BQ, M101PC)
	paign finance report form provided to candidate or committee (M102) mary of the campaign finance law provided (OCPF guide booklet)
	and of the campaign mance law provided (OCT) guide bookiet)
Filing	notice (includes reporting dates, due dates and language concerning late fines) Pre-PreliminaryPre-Election30-DayYear-end
*All forms, guides and n	notices can be delivered by e-mail
	Inspecting Reports
The campaign final	nce law requires local election officials to "inspect" M102 and M102-0 campaign finance reports within 30 days of a due date.
Corre	ct dates for the relevant reporting period
Signa	
N/A Positi	ve ending balance & balance
receiv	M102-0 form is filed, the candidate does not have a committees and has not ed any contributions, made any expenditures or incurred any obligations during the ing period, and does not have a campaign fund in existence.
Contributions	(Monetary receipts and in-kind contributions)
NA	Names and Addresses for contributions of more than \$50
1	Occupation and Employer for contributions of \$200 or more
_	No contributions from corporations, business partnerships, LLCs or LLPs
1	No contributions from individuals for more than \$1,000 (see OCPF's limits chart for other limits)
Expenditures	
NA	Vendor Names and Addresses for expenditures of more than \$50
1	Purpose information is disclosed
	Reimbursements form (R-1s) filed for reimbursements
	Date of Inspection 10/39/39



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: 9/20	File with: City or Town Clerk or Election Commissio O/21 Ending Date: 10-25/21 /0/15/24
Type of Report: (Check one) ☐ 8th day preceding preliminary ☐ 8th day preceding election	30 day after election year-end report dissolution
David A. Murphy	N/A
Candidate Full Name (if applicable)	Committee Name
Northampton City Council at Large Office Sought and District	Name of Committee Treasurer
78 North Elm Street, Northampton, MA 01060	
Residential Address	Committee Mailing Address
E-mail: mail@davidmurphy.com	_ E-mail:
Phone # (optional): 413-530-2275	Phone # (optional):
SUMMARY BALAN	CE INFORMATION:
Line 1: Ending Balance from previous report	-0-
Line 2: Total receipts this period (page 3, line 1)	1) DECEIVED -0-
Line 3: Subtotal (line 1 plus line 2)	OCT 2 6 2021 -0-
Line 4: Total expenditures this period (page 5, li	CITY CLERKS OFFICE NORTHAMPTON, MA 01060
Line 5: Ending Balance (line 3 minus line 4)	-0-
Line 6: Total in-kind contributions this period (p	page 6) -0-
Line 7: Total (all) outstanding liabilities (page 7	-0-
Line 8: Name of bank(s) used: Florence Bank	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority or on behalf of this committee. Signed under the penalties of perjury:	d contributions and liabilities for this reporting period and represents the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1)	box only)
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to t activity, of all persons acting under the authority or on behalf of this committee in incurred any liabilities nor made any expenditures on my behalf during this reporti	the best of my knowledge and belief, a true and complete statement of all campaign finance accordance with the requirements of M.G.L. c. 55. I have not received any contributions, and period that are not otherwise disclosed in this report.
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the contributions.	the best of my knowledge and belief, a true and complete statement of all campaign ints, in-kind contributions and liabilities for this reporting period and represents the this candidate in accordance with the requirements of M.G.L. c. 55.
Signed under the penalties of perjury:	(Candidate's signature) Date: 10/25/21

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

	Name and Residential Address		Occupation & Employer	
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)	
ine 9: Total Receip	ots over \$50 (or listed above)	-0-		
ine 10: Total Recei	pts \$50 and under* (not listed above)	-0-		
ing 11. TOTAL D	ECEIPTS IN THE PERIOD	-0-	E	
			← Enter on page 1, line 2 di include only those receipts not itemized above.	

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
ine 9: Total Receip	ots over \$50 (or listed above)	-0-	
ine 10: Total Recei	pts \$50 and under* (not listed above)	-0-	
ine 11: TOTAL R	ECEIPTS IN THE PERIOD	-0-	← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

	To Whom Paid			
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
				processor and transaction to the second and the second
				A STATE OF THE STA
	L	ine 12: Total Expenditure	s over \$50 (or listed above)	
	L	ine 13: Total Expenditures	\$50 and under* (not listed above)	
	Enter on many 1 15 and 1	ine 14. TOTAL EVDENI	OITHDES IN THE DEDION	
			DITURES IN THE PERIOD 13 should include only those expenditures	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	West of the second seco			
				9
		Line 12: Expenditures over	\$50 (or listed above)	
		Line 13: Expenditures \$50 a	nd under* (not listed above)	
	Enter on page 1, line 4 -	Line 14: TOTAL EXPEND	DITURES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
7 (1)				
		Line 15: In-Kind Contribution	s over \$50 (or listed above)	-0-
		Line 16: In-Kind Contributions	\$ \$50 & under (not listed above)	-0-
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	CONTRIBUTIONS	-0-

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
		Line 18: TOTAL OUTSTAND		-0-